

## Approach to Scope of Pharmacist Prescribing

The Nova Scotia College of Pharmacists (NSCP) is charged with the mandate to govern the practice of pharmacy in the best health interests of the public. The NSCP takes a proactive stance in its responsibility to establish and maintain alignment of the professional regulatory framework with best practices and the public's evolving healthcare needs. As the demands on the healthcare system continue to grow, it is critical that society can obtain the most from its healthcare human resources. It is in the public interest for the NSCP to ensure there are no regulatory barriers to pharmacists and pharmacy technicians bringing the full extent of the knowledge and skills to meeting the public's healthcare needs.

The primary role of pharmacists within the healthcare system is drug therapy management. Drug therapy management encompasses a broad range of practice activities that include assessing an individual's need for medication and prescribing. A pharmacist undertakes these activities in meeting their professional responsibilities to:

- identify potential and actual drug-related problems;
- resolve actual drug-related problems (independently or in collaboration with other members of a patient's care team); and
- prevent potential drug-related problems.

Ensuring that society benefits from this critical role requires identifying and addressing regulatory barriers that prevent pharmacists from bringing the full extent of their knowledge and skills as drug therapy managers to meeting individual and societal healthcare needs.

Addressing regulatory barriers may require seeking legislative changes to amend pharmacists' scope of practice. Frequently, however, they can be addressed by amending components of the existing regulatory framework (e.g., standards of practice, collaborative agreements) so that pharmacists are better able to leverage their existing scope in collaboration with other healthcare professionals. Guided by the NSCP's *Review of Scope of Practice Framework*, the NSCP consults with other relevant health professions and carefully considers pharmacists' current and evolving competencies to determine what change, if any, is in the public's best health interest.

When the contemplated scope of practice change pertains to pharmacist prescribing, the NSCP is further guided by its Competency-Collaboration Framework for Pharmacist Prescribing (Figure 1). This framework is based on the alignment of pharmacists' entry-to-practice competencies with the *Prescribing Safely Canada Physician Prescribing Competencies* established by the Royal College of Physicians and Surgeons of Canada (RCPSC). The extent of alignment between these competencies confirms that those required for prescribing are broadly in place within the profession of pharmacy, with the exception of patient assessment for diagnosis. In this area, pharmacists' competencies have been generally limited to those conditions for which an initial assessment to determine whether drug therapy should be initiated, and what that drug therapy should be, is supported by history and inspection. Recommending drug therapy for these conditions and providing non-prescription

medication, has been a longstanding practice for pharmacists as they supported patients in their self-care of minor ailments.<sup>1</sup>

As such, the NSCP has set out pharmacists' scope of prescribing according to conditions, categorized by the extent to which pharmacists' competencies support them in completing a patient assessment and subsequent determination that initiating drug therapy is warranted. The NSCP has organized its *Standards of Practice: Prescribing Drugs* into the following categories:

- No diagnosis required (preventative)
- Diagnosis / initiating drug therapy is supported by entry-to-practice competencies
- Diagnosis provided indirectly by protocol
- Diagnosis provided directly through collaborative management

When competencies required for initiating drug therapy for a condition are beyond those considered to be broadly in place within the profession, the NSCP ensures a full complement of prescribing competencies by explicitly setting out expectations in the NSCP's *Standards of Practice: Prescribing Drugs* pertaining to:

- additional continuing professional development required to gain competence; and/or
- the extent to which a pharmacist must collaborate with a primary care provider (indirectly or directly) who has the required competence.

Finally, to support the NSCP's ongoing commitment to ensuring that the regulatory framework enables the public to realize the full benefit of a pharmacist's knowledge and skills in meeting their healthcare needs, the NSCP *Standards of Practice: Prescribing Drugs* includes a provision for Council to enable pharmacist prescribing within the context of an approved research project. The *Prescribing in Accordance with a Research or Pilot Protocol: Guidance for Research and Pilot Project Teams* outlines eligibility requirements for a research or pilot protocol to be approved.

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<sup>1</sup> While some pharmacists may have advanced degrees and enhanced prescribing competencies, the NSCP's policy decisions are based on entry-to-practice competencies required broadly of all pharmacists.

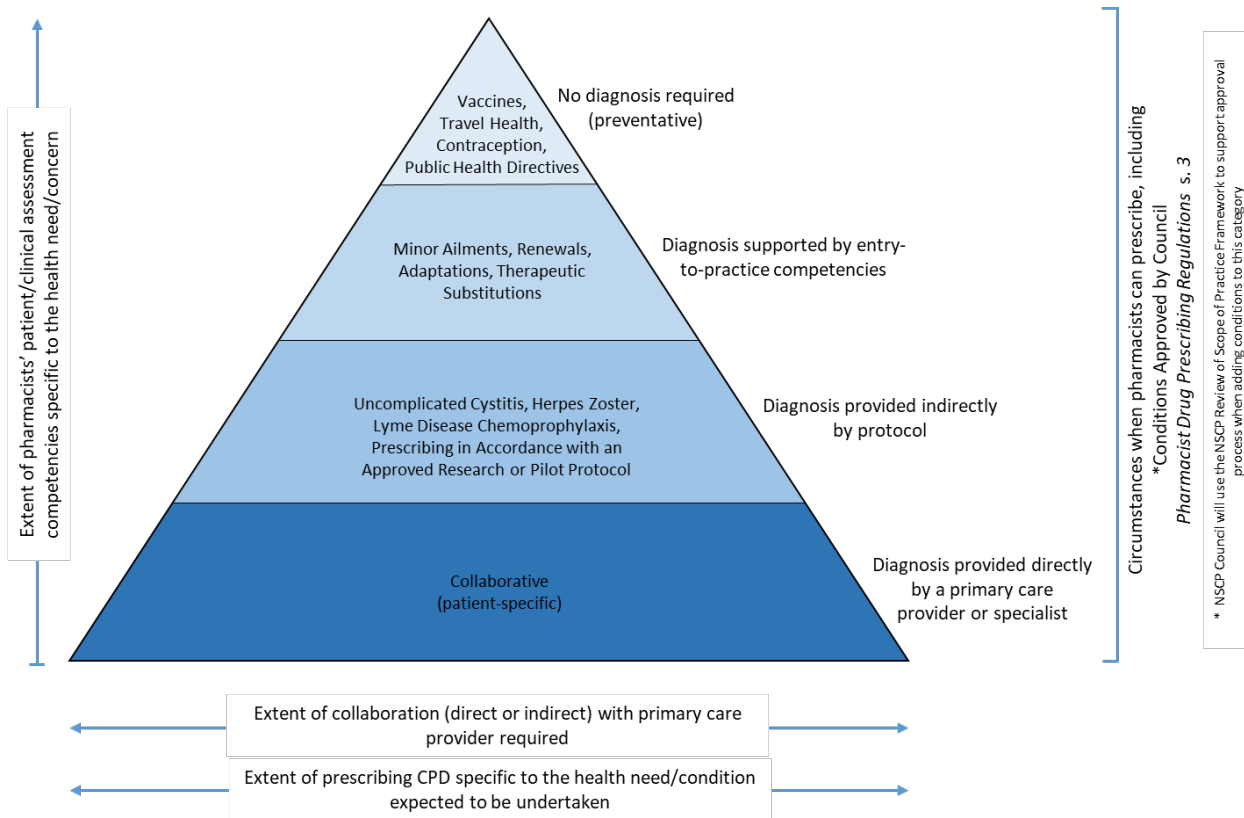


Figure 1. NSCP Competency - Collaboration Framework for Pharmacist Prescribing

Figure 1 illustrates the inverse relationship between the extent of pharmacists' patient/clinical assessment competencies for a particular condition, and the extent to which collaboration with a primary care provider (directly or indirectly) and/or supplemental education is required.